Table 2. Prevention of Skin Cancer

Maneuver	Effectiveness	Levels of Evidence	Recommendation
Total body skin examination	For normal-risk individuals, has not been proven as an effective early detection maneuver	Comparison of times and places<7-9> (11-3)	There is poor evidence to include or exclude from the periodic health examination (PHE) of the general population (C); there is fair evidence for the inclusion of total body skin examination for a very select sub-group of individuals (B)
Self-exam	For individuals at significantly increased risk (ie, family melanoma syndrome [MM] first-degree relative with melanoma) it is prudent to undertake regular examinations (dermatologists may be more accurate assessors)	Comparison of times and places<10-12> (11-3)	There is poor evidence to include or exclude in the periodic health examination (C)
Avoidance of sun exposure and protective clothing	There has been no evaluation of patient ability to detect lesions or of physician ability to alter patient screening skills or behavior except for one study with a positive predictive value of 7% for MM. Evidence from epidermologic studies focusing on etiology of melanoma, prudence, and low-cost/side effects supports the avoidance of excessive sun exposure at mid-day, plus the use of protective clothing.	Comparison of times and places<4> (11-3)	On the basis of epidemiologic data and case-control studies, and prudence, there is fair evidence to include in the periodic health examination.
Sunscreens (for prevention of squamous cell and basal cell carcinoma; and malignant melanoma)	Studies have indicated no effect or raised concerns of increased risk among sunscreen users. At present, the evidence is inconclusive.	Epidemiologic and case- control studies<17-19> (11-2)	There is poor evidence for the inclusion or exclusion of advice on sunscreen use in the PHE to prevent squamous cell carcinoma, and malignant melanoma (C)*

^{*}A randomized controlled trial<16> has demonstrated that sunscreens reduce the rate of recurrence or development of new solar keratoses. While solar keratoses are precursor lesions for squamous cell carcinoma (SCC), they do not represent a sufficiently strong intermediate outcome measure to provide evidence of effectiveness in preventing SCC. There is fair evidence for recommending the use of sunscreens for the reduction of solar keratoses only. (B Recommendation for persons with a prior history of solar keratosis who cannot avoid sun exposure).

Adapted from: Feightner JW. U.S. Preventative Services Task Force. Prevention of Skin Cancer. In: The Canadian Guide to Clinical Preventive Health Care, Section 10: Neoplasms. Chapter 70: Prevention of Skin Cancer, p 850. http://www.hc-sc.gc.ca/hppb/health-care/pubs/clinical_preventive/sec10e.htm (Accessed 04/03/02).